

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI MS. Claudia L NICKNAME LAST SUFFIX Ordaz		OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged
	4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 11738 El Paso, TX 79917		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 929-9065		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Maria NICKNAME LAST SUFFIX Damos		
	7 CAMPAIGN TREASURER ADDRESS (residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 16003 Homestead El Paso, TX 79928		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 346-4929		CITY CLERK DEPT. 2014 JUL 14 PM 5:06
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 6 / 10 / 14 7 / 9 / 14		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special 7 / 19 / 14		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) City Representative District 6
GO TO PAGE 2			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-10-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Tracy Yellen</i> 6 Contributor address; City; State; Zip Code <i>925 McKelligen Dr. El Paso, Texas 79902</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-10-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Martha Salinas</i> Contributor address; City; State; Zip Code <i>2904 Brady El Paso Texas 79936</i>	Amount of contribution (\$) <i>\$20.00</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-10-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lane Gaddy</i> Contributor address; City; State; Zip Code <i>1800 Stanton Avenue El Paso, Texas 79902</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-10-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Stanley Jobe</i> Contributor address; City; State; Zip Code <i>1150 Southview Drive El Paso, Texas 79902</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-10-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Woody E. Grayle Hunt</i> Contributor address; City; State; Zip Code <i>4401 N. Mesa El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-11-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Melissa O'Rourke</i> 6 Contributor address; City; State; Zip Code <i>6041 Torrey Pines El Paso, Texas 79912</i>	7 Amount of contribution (\$) <i>\$250</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-11-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Paul L. Foster</i> Contributor address; City; State; Zip Code <i>123 W. Mills, Suite 200 El Paso, Texas 79901</i>	Amount of contribution (\$) <i>\$2,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-12-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Daniel Longoria</i> Contributor address; City; State; Zip Code <i>140 Camino Barranca El Paso, Texas 79912</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-12-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Deborah Kastrin</i> Contributor address; City; State; Zip Code <i>3940 Flamingo Drive El Paso, Texas 79902</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-12-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Fredrick Francis</i> Contributor address; City; State; Zip Code <i>500 N. Mesa Street El Paso, Texas</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-12-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brown Ranch</i> 6 Contributor address; City; State; Zip Code <i>123 W. Mills, Suite 610 El Paso, Texas 79901</i>	7 Amount of contribution (\$) <i>\$1,000</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-12-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Donald Margo</i> Contributor address; City; State; Zip Code <i>201 E. Main, Suite 1603 El Paso, Texas 79901</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-12-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Woody Rayle Hunt</i> Contributor address; City; State; Zip Code <i>4401 N. Mesa El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$1,449.24</i>	In-kind contribution description (if applicable) <i>Fundraiser expenses</i> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-13-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Miguel Fernandez</i> Contributor address; City; State; Zip Code <i>411 Rim Road El Paso, Texas 79902</i>	Amount of contribution (\$) <i>\$1,500</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-14-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>J.O. Stewart Jr.</i> Contributor address; City; State; Zip Code <i>124 W. Castellano, Suite 23 El Paso, Texas 79912</i>	Amount of contribution (\$) <i>\$300</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-15-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lesley Gosting</i>	7 Amount of contribution (\$) <i>\$50</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>6895 Orizaba Ave. El Paso, TX 79912</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-15-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Curtis Jorgensen</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1024 Singing Hills Dr. El Paso, TX 79912</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John Moses</i>	Amount of contribution (\$) <i>\$30</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3221 Mountain Walk El Paso, Texas 79904</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Casa De Yoga East</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11660 Montwood Drive, M El Paso, Texas 79912</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Kevin McCargy</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4749 Sir Gareth El Paso, Texas 79902</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Luis C. Talavera</i>	7 Amount of contribution (\$) <i>\$50</i>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <i>1011 W. Vandell El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Carlos & Tam. Keating</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>3275 ThCup Road Rio Rancho, NM 87144</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Selena N. Solis</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>1210 Los Angeles El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Julie S. Tarwater</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>3919 O'Keefe El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Larry Phifer</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>904 Winter Drive El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Heather Cuthbertson</i>	7 Amount of contribution (\$) <i>\$100</i>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <i>1121 E. Baltimore El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Charles & Gloria Ambler</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>1125 E. Baltimore El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ted & Molly Stoltzman</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>700 Meadbrook Drive El Paso, TX 79922</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Cristian Perez & Jennifer Giese</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>3721 Waymore El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Nicole & Edward Vaughn</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>3951 Las Vegas Drive El Paso, TX 79902</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Steffanie Evans</i> 6 Contributor address; City; State; Zip Code <i>676 Bryn Mawr Lane Rockwall, TX, 75087</i>	7 Amount of contribution (\$) <i>\$100</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>LU A Beaman</i> Contributor address; City; State; Zip Code <i>6186 Los Felinos El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lisa & John Goodrich</i> Contributor address; City; State; Zip Code <i>4750 Portsmouth Blvd El Paso, TX 79922</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Marcia Turner</i> Contributor address; City; State; Zip Code <i>5755 Kingsfield El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Rebecca Goodman & Alan Krasne</i> Contributor address; City; State; Zip Code <i>1107 Baltimore Drive El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$200</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Michael Graham</i> 6 Contributor address; City; State; Zip Code <i>23 Cielo Vista Anthony, NM 88021</i>	7 Amount of contribution (\$) <i>\$200</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ann Morgan Lilly</i> Contributor address; City; State; Zip Code <i>700 Blacker Avenue El Paso, TX 79907</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Mary Margaret & Margaret Torres Arne</i> Contributor address; City; State; Zip Code <i>764 Dahlia El Paso, TX 79922</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Michael Wendt</i> Contributor address; City; State; Zip Code <i>10 Goodwin El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Sirous Partovi & Patricia Wetzel</i> Contributor address; City; State; Zip Code <i>813 Twin Hills El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Donald Margo III</i> 6 Contributor address; City; State; Zip Code <i>808 Blanchard El Paso, TX 79902</i>	7 Amount of contribution (\$) <i>\$250</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Joseph Moody Campaign</i> Contributor address; City; State; Zip Code <i>PO Box 920827 El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$350</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard Teschner</i> Contributor address; City; State; Zip Code <i>1800 N. Stanton Ave, Suite 302 El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$500</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Robert O'Rourke</i> Contributor address; City; State; Zip Code <i>1209 Prospect El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$500</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>L. Fredrick Francis</i> Contributor address; City; State; Zip Code <i>500 N. Mesa El Paso, TX 79901</i>	Amount of contribution (\$) <i>\$1,000</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-16-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Susan & Ruben Guerra</i> 6 Contributor address; City; State; Zip Code <i>5848 Diamond Point Circle El Paso, TX 79912</i>	7 Amount of contribution (\$) <i>\$500</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Michael Guerra</i> Contributor address; City; State; Zip Code <i>408 Cincinnati El Paso TX, 79902</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Asher & Jo Ann Casey Fienburg</i> Contributor address; City; State; Zip Code <i>1000 Madeline Dr. El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$175</i>	In-kind contribution description (if applicable) <i>Fundraiser expenses</i>
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Beto & Amy O'Rourke</i> Contributor address; City; State; Zip Code <i>1209 Prospect Street El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$75</i>	In-kind contribution description (if applicable) <i>Fundraiser expenses</i>
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Josh & Martha Hunt</i> Contributor address; City; State; Zip Code <i>1101 E. Baltimore El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$75</i>	In-kind contribution description (if applicable) <i>Fundraiser expenses</i>
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Claudia Ordaz

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-16-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Michael S. Pana Guerra

6 Contributor address; City; State; Zip Code

408 Cincinnati
El Paso, TX 79922

7 Amount of
contribution (\$)

\$75

8 In-kind contribution
description (if applicable)

Fundraiser
expenses

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-17-14

Full name of contributor

☐ out-of-state PAC (ID#)

Keeli Jernigan

Contributor address; City; State; Zip Code

817 Forest Willow Circle
El Paso, TX 79922

Amount of
contribution (\$)

\$50

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-17-14

Full name of contributor

☐ out-of-state PAC (ID#)

Marcia Turner

Contributor address; City; State; Zip Code

5755 Kingsfield
El Paso, TX 79922

Amount of
contribution (\$)

\$100

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-17-14

Full name of contributor

☐ out-of-state PAC (ID#)

Local 51, Inc.
The El Paso Association of Fire Fighters

Contributor address; City; State; Zip Code

3112 Forney Drive
El Paso, TX 79935

Amount of
contribution (\$)

\$1,500

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-18-14

Full name of contributor

☐ out-of-state PAC (ID#)

William Sanders

Contributor address; City; State; Zip Code

920 Broadmoor Drive
El Paso, TX 79922

Amount of
contribution (\$)

\$200

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Claudia Ordaz		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-18-14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Edward Escudero 6 Contributor address; City; State; Zip Code 34 Goodwin El Paso, TX 79902	7 Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6-18-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robert Snow Contributor address; City; State; Zip Code 4941 Meadobark El Paso, TX 79922	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6-20-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Richard Thomas Contributor address; City; State; Zip Code 5915 Silver Springs, 6A El Paso, Texas 79912	Amount of contribution (\$) \$150 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6-20-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sara McKnight Contributor address; City; State; Zip Code 612 Satellite Dr. El Paso, TX 79912	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6-23-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dennis; Donna Neesen Trust Contributor address; City; State; Zip Code 5625 South Desert El Paso, TX 79932	Amount of contribution (\$) \$200 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-24-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Stanley Jobe</i> 6 Contributor address; City; State; Zip Code <i>1150 Southview Dr. El Paso, TX 79928</i>	7 Amount of contribution (\$) <i>\$1000</i> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-24-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Judith Ackerman</i> Contributor address; City; State; Zip Code <i>3344 Eileen Drive El Paso, TX 79904</i>	Amount of contribution (\$) <i>\$100</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-24-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>J. Robert Brown</i> Contributor address; City; State; Zip Code <i>123 W. Mills, Suite 610 El Paso, TX 79901</i>	Amount of contribution (\$) <i>\$1000</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-24-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Deborah Kastrin</i> Contributor address; City; State; Zip Code <i>3940 Flamingo Dr. El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$250</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-24-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>El Paso Municipal Police Officers Association Political Action Committee</i> Contributor address; City; State; Zip Code <i>747 E. San Antonio, Ste 103 El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$4000</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-25-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Asher Feinburg; Jo Ann Casey</i> 6 Contributor address; City; State; Zip Code <i>1000 Madeline Drive El Paso, TX 79902</i>	7 Amount of contribution (\$) <i>\$150</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date <i>6-26-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Nicholas Lamantia</i> Contributor address; City; State; Zip Code <i>6949 Market Avenue El Paso, TX 79915</i>	Amount of contribution (\$) <i>\$500</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Rachel Harracksingh</i> Contributor address; City; State; Zip Code <i>5720 Trowbridge, Suite B El Paso, TX 79925</i>	Amount of contribution (\$) <i>\$350</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>William Lockhart</i> Contributor address; City; State; Zip Code <i>7105 Villa Hermosa El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lari Rotman</i> Contributor address; City; State; Zip Code <i>405 Valplano El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$200</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-27-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>E.R. Lilly Jr.</i>	7 Amount of contribution (\$) <i>\$100</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>700 Blacker El Paso, TX 79902</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Veronica Escobar; Michael Peters</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3014 Copper Ave. El Paso, TX 79930</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Teresa; Javier Diaz</i>	Amount of contribution (\$) <i>\$200</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>812 Cheltenham El Paso, TX 79912</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard Teschner</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1200 N. Stanton, 302 El Paso, TX 79902</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Rosa Alfaro</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10260 Lveilla Ave. El Paso, TX 79925</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-27-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Eliot Shapleigh</i> 6 Contributor address; City; State; Zip Code <i>701 N. St. Vrain El Paso, TX 79902</i>	7 Amount of contribution (\$) <i>\$250</i>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lisa Soto</i> Contributor address; City; State; Zip Code <i>PO Box 12307 El Paso, TX 79913</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-27-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Joyce Feinberg</i> Contributor address; City; State; Zip Code <i>701 Blanchard El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$20.50</i>	In-kind contribution description (if applicable) <i>Fundraiser expenses</i> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-28-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Morris Taylor</i> Contributor address; City; State; Zip Code <i>9013 El Dorado Dr. El Paso, TX 79925</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-30-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Scott Weaver</i> Contributor address; City; State; Zip Code <i>123 W. Mills, Suite 600 El Paso, Texas 79901</i>	Amount of contribution (\$) <i>\$500</i>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-30-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Isha Rogers</i> 6 Contributor address; City; State; Zip Code <i>1505 Rim Road El Paso, TX 79902</i>	7 Amount of contribution (\$) <i>\$500</i>	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>7-1-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>JK Robison</i> Contributor address; City; State; Zip Code <i>El Paso, TX 79902 4445 N. Mesa</i>	Amount of contribution (\$) <i>\$1000</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-1-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Irma Corella</i> Contributor address; City; State; Zip Code <i>641 Lombardery El Paso, TX 79907</i>	Amount of contribution (\$) <i>\$50</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Harold Hahn</i> Contributor address; City; State; Zip Code <i>2244 Trawood, 100 El Paso, TX 79935</i>	Amount of contribution (\$) <i>\$1000</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>E.C. Houghton</i> Contributor address; City; State; Zip Code <i>414 Executive Center El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$1000</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7-2-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>The Honorable Carlos J. Caella</i> <i>Retired. IRS/CID. Special Agent.</i> 6 Contributor address; City; State; Zip Code <i>PO Box 75</i> <i>El Paso, TX 79936</i>	7 Amount of contribution (\$) <i>\$50</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>7-2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jimmie Britton</i> Contributor address; City; State; Zip Code <i>PO Box 265</i> <i>El Paso, TX 79936</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Dene Rogers</i> Contributor address; City; State; Zip Code <i>1800 Stanton Ave, 1103</i> <i>El Paso, TX 79902</i>	Amount of contribution (\$) <i>\$2000</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Raymond Palacios</i> Contributor address; City; State; Zip Code <i>637 Willow Glen Dr.</i> <i>El Paso, TX 79922</i>	Amount of contribution (\$) <i>\$1000</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-3-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Carlos Montoya</i> Contributor address; City; State; Zip Code <i>12008 Pueblo Laguna</i> <i>El Paso, TX 79936</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7-4-14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Cesar Blanco</i> 6 Contributor address; City; State; Zip Code <i>PO Box 27074 El Paso, TX 79926</i>	7 Amount of contribution (\$) <i>\$250</i>	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>7-4-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Mary Karlsrher</i> Contributor address; City; State; Zip Code <i>35 Sun Point El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$500</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-6-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Larry Porras</i> Contributor address; City; State; Zip Code <i>3705 Kiowa Creek El Paso, TX 79911</i>	Amount of contribution (\$) <i>\$25</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>7-7-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jose Cardenas</i> Contributor address; City; State; Zip Code <i>6105 Camino Alegre El Paso, TX 79912</i>	Amount of contribution (\$) <i>\$300</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>6-16-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Paul Ro & Marina Monsisvais</i> Contributor address; City; State; Zip Code <i>2209 Pittsburg Avenue El Paso, TX 79930</i>	Amount of contribution (\$) <i>\$100</i>	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Claudia Ordaz		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-12-14		5 Payee name Bush Signs, LLC			
6 Amount (\$) \$3,368.33		7 Payee address; City; State; Zip Code 300 May Street Montgomery, AL 36104			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising expense		(b) Description (If travel outside of Texas, complete Schedule T) Signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-14-14		Payee name Juan Garcia			
Amount (\$) \$180		Payee address; City; State; Zip Code 608 Francis El Paso, TX 79905			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-14-14		Payee name Nicole Drury			
Amount (\$) \$180		Payee address; City; State; Zip Code 608 Francis El Paso, TX 79905			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-19-14		Payee name Go Direct Mailing Services			
Amount (\$) \$1,376.58		Payee address; City; State; Zip Code 8400 Boeing Dr. El Paso, TX 79925			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) mail processing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Claudia Ordaz	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-19-14	5 Payee name Christian Martinez
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6 Amount (\$) \$180	7 Payee address; City; State; Zip Code 12615 Kari Anne Dr. El Paso, TX
------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-20-14	Payee name All Print
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Amount (\$) \$2,296	Payee address; City; State; Zip Code 7230 Gateway Blvd. El Paso, TX 79915
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing expense	Description (If travel outside of Texas, complete Schedule T) campaign literature
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-20-14	Payee name The Forma Group LLC
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Amount (\$) \$3,000	Payee address; City; State; Zip Code 301 E. San Antonio El Paso, TX 79901
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Graphic design / Consulting	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-21-14	Payee name Christian Martinez
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Amount (\$) \$160	Payee address; City; State; Zip Code 12615 Kari Anne Dr. El Paso, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Claudia Ordaz		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-21-14		5 Payee name Angel Ramirez			
6 Amount (\$) \$140		7 Payee address; City; State; Zip Code 454 Cobridge Valley El Paso, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 6-21-14		Payee name Juan Garcia			
Amount (\$) \$240		Payee address; City; State; Zip Code 608 Francis El Paso, TX 79905			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 6-21-14		Payee name Nicole Drury			
Amount (\$) \$240		Payee address; City; State; Zip Code 608 Francis El Paso, TX 79905			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 6-22-14		Payee name Office Depot			
Amount (\$) \$108.54		Payee address; City; State; Zip Code 1313 George Dieter El Paso, TX 79936			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) other		Description (If travel outside of Texas, complete Schedule T) office supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <u>Claudia Ordaz</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6-23-14</u>		5 Payee name <u>Go Direct Mailing Services</u>			
6 Amount (\$) <u>\$1,562.91</u>		7 Payee address; City; State; Zip Code <u>8400 Boeing Dr.</u> <u>El Paso, TX 79925</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <u>Other</u>		(b) Description (If travel outside of Texas, complete Schedule T) <u>mail processing</u>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>6-25-14</u>		Payee name <u>AllPrint</u>			
Amount (\$) <u>\$880</u>		Payee address; City; State; Zip Code <u>7230 Gateway Blvd.</u> <u>El Paso, TX 79915</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Printing expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign literature</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>6-25-14</u>		Payee name <u>The Forma Group LLC</u>			
Amount (\$) <u>\$1500</u>		Payee address; City; State; Zip Code <u>301 E. San Antonio</u> <u>El Paso, TX 79901</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Graphic Design / Consulting</u>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>6-25-14</u>		Payee name <u>Office Depot</u>			
Amount (\$) <u>\$337.06</u>		Payee address; City; State; Zip Code <u>1313 George Dieter</u> <u>El Paso, TX 79936</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Other</u>		Description (If travel outside of Texas, complete Schedule T) <u>Office Supplies</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Claudia Ordaz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6-28-14</i>		5 Payee name <i>Gio Direct Mailing Services</i>			
6 Amount (\$) <i>\$1,131.01</i>		7 Payee address; City; State; Zip Code <i>8400 Boeing Dr. El Paso, TX 79925</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Other</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>mailing processing</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>6-29-14</i>		Payee name <i>Gio Direct Mailing Services</i>			
Amount (\$) <i>\$1,649.33</i>		Payee address; City; State; Zip Code <i>8400 Boeing Dr. El Paso, TX 79925</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Other</i>		Description (If travel outside of Texas, complete Schedule T) <i>mail processing</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>7-1-14</i>		Payee name <i>Juan Garcia</i>			
Amount (\$) <i>\$288</i>		Payee address; City; State; Zip Code <i>608 Francis El Paso, TX 79905</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contract Labor</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>7-1-14</i>		Payee name <i>Nicole Drury</i>			
Amount (\$) <i>\$288</i>		Payee address; City; State; Zip Code <i>608 Francis El Paso, TX 79905</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contract Labor</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <u>Claudia Ordaz</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>7-1-14</u>		5 Payee name <u>Cristian Martinez</u>			
6 Amount (\$) <u>\$189</u>		7 Payee address; City; State; Zip Code <u>12615 Kari Anne</u> <u>El Paso, TX</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <u>Contract labor</u>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>7-3-14</u>		Payee name <u>All Print</u>			
Amount (\$) <u>\$1,078</u>		Payee address; City; State; Zip Code <u>7230 Gateway Blvd.</u> <u>El Paso, TX 79915</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Printing expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign literature</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>7-3-14</u>		Payee name <u>The Forma Group, LLC</u>			
Amount (\$) <u>\$1500</u>		Payee address; City; State; Zip Code <u>301 E. San Antonio</u> <u>El Paso, TX 79901</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Graphic Design/Consulting</u>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>7-4-14</u>		Payee name <u>All Print</u>			
Amount (\$) <u>\$1,202</u>		Payee address; City; State; Zip Code <u>7230 Gateway Blvd</u> <u>El Paso, Texas 79915</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Printing Expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign literature</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Claudia Ordoz</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7-4-14</i>		5 Payee name <i>Tro Forma Group, LLC</i>			
6 Amount (\$) <i>\$1500</i>		7 Payee address; City; State; Zip Code <i>301 E. San Antonio El Paso, TX 79901</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Graphic Design/Consulting</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>7-4-14</i>		Payee name <i>Call Fire</i>			
Amount (\$) <i>\$100.00</i>		Payee address; City; State; Zip Code <i>1410 2nd St Suite 200 Santa Monica, CA 90401</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Voter Outreach</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>7-8-14</i>		Payee name <i>Juan Garcia</i>			
Amount (\$) <i>\$270</i>		Payee address; City; State; Zip Code <i>608 Francis El Paso, TX 79905</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contract Labor</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>7-8-14</i>		Payee name <i>Nicole Drury</i>			
Amount (\$) <i>\$270</i>		Payee address; City; State; Zip Code <i>608 Francis El Paso, TX 79905</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contract Labor</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Claudia Ordez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7-8-14		5 Payee name Cristian Martinez			
6 Amount (\$) \$288		7 Payee address; City; State; Zip Code 12415 Kari Anne Drive El Paso, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 7-8-14		Payee name Leonardo Lugo			
Amount (\$) \$240		Payee address; City; State; Zip Code 641 Casa Grande El Paso TX 79907			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 7-9-14		Payee name Taylor Cortinas			
Amount (\$) \$342		Payee address; City; State; Zip Code 11662 Janet Cados Ln. El Paso, Texas 79936			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Claudia Ordaz

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pagesCITY CLERK DEPT
2014 JUL 14 PM 5:0417 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

39,444.72

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

1,367.01

4. TOTAL POLITICAL EXPENDITURES

\$

26,084.76

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

16,741.23

OUTSTANDING
LOAN TOTALS

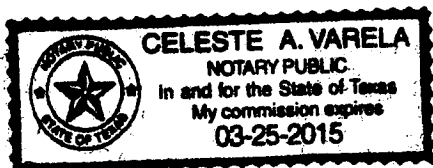
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

0

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Claudia L. Ordaz
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Claudia L. Ordaz, this the 14th day of July, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath